

CITE AS:

Konrath, S. & *Bonadonna, J.P. (2014, in press) *Narcissism*. In Whitbourne, S. (Ed.), *The Encyclopedia of Adulthood and Aging*, Wiley Press.

Title: Narcissism

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Word Count: 2,067 (includes Main Text, SEE ALSO, References)

Abstract

Narcissism is a personality trait that is characterized by excessively positive self-views and low empathy. It is a complex constellation consisting of mostly positive individual correlates and mostly negative social correlates. We present two different theoretical models that attempt to reconcile these apparently contradictory implications of narcissism. There are predictable age and gender differences in narcissism. In addition, narcissism is relatively high in Western individualistic cultures, and increasing over time in the United States, yet it is relatively lower in Eastern collectivistic cultures. This suggests that cultural norms and developmental experiences can possibly influence it.

Main Text

Narcissism is a personality trait that in the extreme can be a personality disorder. The term 'narcissism' was first used in Ovid's *Metamorphoses* (Book III) in the myth of Narcissus, a handsome young man whose self-love causes his eventual destruction. Narcissism was then discussed by early clinical psychologists (e.g. Havelock Ellis, Sigmund Freud, Ernest Jones) in the late 19th and early 20th centuries. In these early writings, the meaning of narcissism did not always correspond to current clinical and personality definitions today. For example, patients with auto-erotic fixations (i.e. self as own sexual object) were called narcissistic in the early clinical literature. But another usage of the term narcissism, one that referred to grandiose and self-admiring traits, also simultaneously emerged in the early clinical literature by a number of writers (e.g. Sigmund Freud, Wilhelm Reich, Karen Horney, Annie Reich). Heinz Kohut and Otto Kernberg also wrote extensively about the development and consequences of the narcissistic personality in the 1970s. Narcissism was first added to the DSM-III as a personality disorder in 1980.

Personality and social psychologists now see narcissism as a personality trait existing at the sub-clinical level in normal populations. Most of these scholars see two fundamental dimensions of narcissism: excessive self-focus and low empathy. Narcissism can be more *grandiose (overt)* versus more *vulnerable (covert)*. Both types involve excessive self-focus and low empathy, but they otherwise have quite different profiles. Unlike grandiose narcissism, vulnerable narcissism is associated with negative self-preoccupations, worries about others' negative evaluations, shyness, and emotional fragility. The vast majority of narcissism research focuses on grandiose narcissism

Although projective (e.g. Thematic Apperception Test; Rorschach) and Q-sort techniques have been used to measure narcissism, by far the most common methods of assessment are self-report measures. The most widely used of these is the Narcissistic Personality Inventory,

containing 40 forced-choice items (e.g., “*If I ruled the world it would be a better place*” versus “*The thought of ruling the world frightens the hell out of me*”), used to measure grandiose narcissism. The NPI can be broken down into several subscales, most commonly seven. These subscales can also be combined to examine *healthy* versus *unhealthy* narcissism. Other less established measures of narcissism include the Hypersensitive Scale (HSNS), which measures vulnerable (or covert) narcissism, the Five-Factor Narcissism Inventory (FFNI), and the Pathological Narcissism Inventory (PNI), which both measure grandiose and vulnerable narcissism.

More (overt) narcissistic people have higher self-esteem, and are happier, less depressed, less anxious, and more creative than less narcissistic people. Yet they are prone to high defensiveness, and physiological measures (e.g. stress hormones, cardiovascular) show a pronounced reactivity to stress among narcissistic people, pointing to the value of moving beyond self-report when studying narcissism. Narcissism is also associated with poor interpersonal relationships. Early on in narcissism’s history, clinical theorists observed that if narcissistic people experienced a threat to their egos, they would act aggressively. Indeed, there is much contemporary research in support of this idea.

Two theoretical models help to explain many of the correlates of narcissism. *The Extended Agency Model*, proposed by Campbell and Foster (2007), suggests that narcissism consists of a system that prioritizes agentic concerns (e.g. status, power) over communal concerns (e.g. warmth, connection). The narcissistic personality also has an approach orientation (strongly motivated by reward), a sense of entitlement, and grandiose self-views. These features lead to certain *interpersonal skills* (e.g. confidence, charisma, extraversion), *interpersonal strategies* (e.g. game playing with others, self-promotion, showing off), and *intrapersonal strategies* (e.g. self-serving biases).

Campbell and Foster posit that the components of this system work to reinforce one another, creating a self-regulatory mechanism for narcissistic people that produces positive feelings, known as *narcissistic esteem*, which is characterized by feelings of dominance and pride. In order for this system to be established and maintained, suitable factors must exist. These factors are those that promote and nurture the components of the system, such as constant praise and attention. As time progresses, the minimum thresholds needed to maintain this system increase, making it increasingly difficult to preserve. Thus, narcissistic esteem operates similarly to an addictive substance, affecting narcissistic people and their loved ones in predictably undesirable ways as narcissistic tendencies unfold.

The *Dynamic Self-Regulatory Model*, proposed by Morf and Rhodewalt (2001), also helps to explain the complexities of correlates of narcissism. *Self-regulation* is the process by which narcissistic people moderate their self-image through inter- and intrapersonal processes. Narcissistic *interpersonal processes* are characterized by social manipulations that draw positive responses from others, in order to elevate self-esteem. Narcissistic *intrapersonal processes* are the engineers of narcissistic social behaviors. These are often characterized by an internal manipulation of social feedback in order to fit the grandiose self-views of narcissistic people (e.g. selecting only positive aspects of feedback, or inaccurately recalling past events). These self-regulatory processes are thought to be at the core of the narcissistic personality.

Morf and Rhodewalt posit that narcissistic self-knowledge is grandiose in nature, yet also quite delicate. This causes the narcissist’s self-esteem to fluctuate drastically, depending on their social interactions, yet also to remain much higher than average. Narcissistic people use social relationships to their advantage in order to build themselves up, but ultimately these relationships

fail, since narcissistic people have low empathy and low trust in others. Herein lies the paradoxical life of narcissistic people: their social behaviors ultimately end the relationships that they count on in order to maintain their grandiose self-views.

There are predictable age and gender differences in narcissism. Several studies have found that younger people are more narcissistic than older people. The exact reason for this finding, however, is unknown. The *disorder burnout* theory suggests that narcissistic traits decrease with age, a pattern that clinicians have observed in other disorders (e.g. antisocial personality disorder, borderline personality disorder). The *reality principle model* also attempts to explain this finding. As children and adolescents age, they are presented with more challenges, and therefore more chances to fail. As they encounter more and more of these challenges and failures, the traits associated with narcissism diminish because reality overrides grandiose visions. Another theory, *birth cohort effects*, however, offers an additional explanation. Some social scientists posit that younger generations were raised in an era where the focus on self-esteem and individual identity was much higher than those in older generations. This would help to explain both the fact that young adults score higher on the Narcissistic Personality Inventory than older adults, and that young adults in recent years score higher on the NPI compared to young adults from previous generations.

Many studies have also found that men tend to be more narcissistic than women. This result is not surprising, since men are generally socialized to take on a more independent role, while women are socialized to be more interdependent. In addition, narcissism is relatively high in Western individualistic cultures (e.g. United States), yet it is relatively lower in Eastern collectivistic cultures (e.g. Japan). Furthermore, other studies have found a positive relationship between narcissism and independent self-construal, a construct very closely related to individualism. Taken together, age, gender, and cultural differences in narcissism suggest that cultural norms and developmental experiences can possibly influence narcissism. Indeed, studies concerning the development of narcissism find that more indulgent, permissive, and indifferent parenting styles are more likely to elicit narcissistic traits.

Little research exists on the potential long-term health consequences of narcissism, but recent longitudinal studies have begun to shed light on this area of interest. These studies have demonstrated that over a course of time, narcissism may increase in people with a combination of high well-being and low emotional reactivity. In addition, those with high levels of *unhealthy* narcissism who also show an over-identification with others demonstrate a decline in psychological health from their early 30s to mid 70s. However, people with a high level of *healthy* narcissism have higher psychological health throughout this timespan. Another longitudinal study demonstrated that between the ages of 43 and 53, Hypersensitivity (a measure of unhealthy narcissism) predicts more depressive symptoms, more physical health problems, and lower life satisfaction and well-being. The same study revealed that increases in Willfulness (unhealthy) and Autonomy (healthy) predict increased psychological and physical health. Finally, female *vulnerable* narcissists demonstrate individuality and creativity during their college years, however, at midlife these women have more psychological distress, depression, anger, unhappy intimate relationships, and the use of psychotherapy. On the other hand, grandiose narcissism in females predicts successful careers at mid-life, and is uncorrelated with pathology. It is important to note, however, that with longitudinal studies, causal inferences cannot be made.

Future research should be aware of the problems with self-report outcome measures when studying a trait characterized by excessively positive self-focus. Thus, physiological (e.g. fMRI

studies), social cognitive (e.g. implicit association tests), and behavioral (e.g. aggression) measures should be used whenever possible. In addition, although much is known about the developmental antecedents and consequences of the personality trait narcissism, very little is known about how to either reduce narcissism itself, or its undesirable outcomes such as aggressive behavior. Strategies that address one of its core defining features (e.g. increasing empathy) are recommended.

SEE ALSO:

Age, Cohort and Period Effects; Close/Romantic relationships; Cultural differences in personality development; Psychosocial development

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Sara Konrath is an assistant professor at the Research Center for Group Dynamics, Institute for Social Research, University of Michigan. John Paul Bonadonna graduated from the University of Michigan in 2013 with a Bachelor of Science in Biopsychology, Cognition, and Neuroscience.

Key Words

Narcissism; Self-focus; Self-esteem; Egotism; Empathy; Individual Differences; Individualism; Personality Disorders